POLITICAL COMMITTEE CITY OF TEMPE CAMPAIGN FINANCE REPORT

2008 March/May Regular Election

Elect Julie Jakubek Full Name of Committee 1220 South Ash Ave 85281 (602) 741-5729 Tempe, AZ Maricopa ZIP Code N/A Sponsoring Organization or Candidate and office Name of Candidate and Office Sought (if applicable) julie@julieforcouncil.com (480) 990-7863 E-Mail Address Fax#

FOR OFFICE USE ONLY

RECEIVED APR 10 2008 CITY CLERK

3A. ID#

| 4. | REPORTING PERIOD (Please check appropriate box) | | DUE BETWEEN | | | |
|----|--|--------------------------------------|--|--|--|--|
| | January 31 Report - For Period of June 6, 2006 thru December 31, 2007 | Jan | nuary 1, 2008 thru January 31, 2008 | | | |
| | Pre-Primary Election Report - For Period of January 1, 2008 thru February 20, 2008 February 21, 2008 thru February 28, 2008 | | | | | |
| 1 | Post-Primary Election Report - For Period of February 21, 2008 thru March | 31, 2008 | April 1, 2008 thru April 10, 2009 | | | |
| | Pre-General Election Report - For Period of April 1, 2008 thru April 30, 2008 | 3 | . May 1, 2008 thru May 8, 200 | | | |
| | Post-General Election Report - For Period of May 1, 2008 thru June 9, 2008 | 3 Ju | ne 10, 2008 thru June 19, 200 | | | |
| | **January 31 Report - For Period of June 10, 2008 thru December 31, 2009 | Januar | y 1, 2010 thru January 31, 2010 | | | |
| 5. | SUMMARY | Column A Total This Reporting Period | Column B Election Period Total To Date | | | |
| 5a | Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee) | | 0 | | | |
| 5b | Cash on Hand at the Beginning of this Reporting Period | \$1,262.95 | | | | |
| 5c | Total Receipts (from corresponding columns on Detailed Summary Page, Line 8) | \$13,370 | \$33,060 | | | |
| 5d | Subtotal [add Lines b and c for Column A and add lines a and c for Column B] | \$14,632.95 | \$33,060 | | | |
| 6a | Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines] | | 0 | | | |
| 6b | Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18) | \$10,490 | \$28,893.05 | | | |
| 7. | Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d] | \$4,142.95 | \$4,166.95 | | | |

^{*}Insert date which is 21 days after date of last election (A.R.S. §16-913).

^{**}Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

| 1. | Committee Name: Elect Julie Jakubek | 2. ID# | | |
|---------------|--|----------------------------|------------------------------|--|
| 3. | Report covering period from Feb 21, 2008 Thru March 31, 208 | 08-07 | 7 | |
| _ | | I | 1 | |
| | RECEIPTS | COLUMN A THIS PERIOD | COLUMN B CAMPAIGN TO DATE | |
| 4. | Contributions other than loans and in-kind: | | | |
| | (a) Individuals - more than \$25 (Total from Schedule A) | \$5,730 | \$16,400 | |
| | (b) Individuals - aggregate \$25 or less (Total from Schedule A-1) | 0 | \$20 | |
| | (c) Political Committees (Total from Schedule B) | \$590 | \$790 | |
| | (d) Subtotal Contributions [add 4(a), 4(b), and 4(c)] | \$6,320 | \$17,210 | |
| | (e) Refund of contributions (Total from Schedule F-2) | 0 | 0 | |
| | (f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)] | \$6,320 | \$17,210 | |
| 5. | (a) Loans made or guaranteed by candidate (Total from Schedule C) | \$6,950 | \$15,450 | |
| | (b) All other loans (Total from Schedule C-1) | 0 | 0 | |
| | (c) Total Loans [add 5(a) and 5(b)] | \$6,950 | \$15,450 | |
| 6. | In-kind contributions (Total from Schedule E) | \$100 | \$400 | |
| 7. | Dividends, interest, and other forms of receipts (Total from Schedule F-1) | 0 | 0 | |
| 8. | Total Receipts [add 4(f), 5(c), 6, and 7] | \$13,370 | \$33,060 | |
| | QUALIFYING CONTRIBUTION RECEIPTS | | | |
| Q | ualifying Contributions of \$5 from Individuals (Total from Schedule A2). | 0 | 0 | |
| | DISBURSEMENTS | | | |
| 9. | Expenditures for operating expenses (Total from Schedule D) | \$9,890 | \$27,993.05 | |
| 10 | D. Independent Expenditures (Total from Schedule D-1) | 0 | 0 | |
| 11 | Value of In-kind expenditures (Total from Schedule E) | \$100 | \$400 | |
| 12 | 2. Loans made by reporting committee (Total from Schedule D-2) | 0 | 0 | |
| 13 | 3. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4) | \$500 | \$500 | |
| | (b) Repayment of all other loans (Total from Schedule D-5) | 0 | 0 | |
| | (c) Total Loan Repayments [add 13(a) and 13(b)] | \$500 | \$500 | |
| 14 | Transfers to other political committees (Total from Schedule D-6) | 0 | 0 | |
| 15 | 5. Any other disbursement (Total from Schedule D-7) | 0 | 0 | |
| 16 | 5. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15] | \$10,490 | \$28,893.05 | |
| 17 | 7. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3) | 0 | 0 | |
| 18 | Total disbursements [subtract line 17 from line 16] | \$10,490 | \$28,893.05 | |
| 19 | Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3) | | | |
| 20. I c | ertify, under penalty of perjury, that I have examined the contents of this campaign finance report and to | the best of my knowledge a | nd belief it is true and | |
| lulie Jakubek | | | | |
| | Print Name of Treasurer | Trolacox | | |
| | V V | 1,01000 | | |

SCHEDULE A

| | 1. Committee Name Elect Julie Jakubek | | | 2. ID# 08-07 | |
|-----|--|--|----------------|--------------------|--------------------------|
| | 3. Report covering period from February 21, 2008 | thr | March 31, 2008 | 3 | |
| 4 | CONTRIBUTION | CONTRIBUTIONS | | AMOUNT RECEIVED | CUMULATIVE TOTAL THIS |
| | NAME, ADDRESS, OCCUPATION AND EMPLOYER C | DR CONTRIBUTOR | | THIS PERIOD | CAMPAIGN TO DATE |
| 4a. | LAST FIRST Attridge, Monica | MI | | | |
| | STREET ADDRESS 332 E Geneva Dr | 03/24/2008 | \$80 | \$80 | |
| | Tempe, AZ 85282 | ZIP | | φου | 400 |
| | OCCUPATION Accountant | BH Consulting | | | |
| b. | LAST FIRST Campana, Cassidy | MI | | | |
| | STREET ADDRESS 7449 E Edward Ave | | 03/31/2008 | \$150 | \$150 |
| | STATE Scottsdale, AZ 85260 | ZIP | 03/31/2000 | | |
| | occupation Marketing | EMPLOYER Parenti Communications | | | |
| C. | LAST FIRST Campana, Katie | МІ | | | |
| | STREET ADDRESS 5304 N 78th Way | | 03/31/2008 | \$60 \$ | \$60 |
| | CITY STATE Scottsdale, AZ 85250 | ZIP | 03/31/2006 | | \$60 |
| | OCCUPATION Director of Community Relations | EMPLOYER Phoenix Chamber of Commerce | | | |
| d. | LAST FIRST Ouzts, Kristine | МІ | | | |
| | STREET ADDRESS 2553 E Mallory | | 03/38/3008 | | # 40 |
| | CITY STATE Mesa, AZ 85213 | ZIP | 03/26/2008 | 3/28/2008 \$40 \$4 | \$40 |
| | OCCUPATION Accountant | EMPLOYER Johnson Bank | | | |
| θ. | LAST FIRST Grothman, Robert H | МІ | | | |
| | STREET ADDRESS 16220 N Edgewater Dr | | 00/04/0000 | | |
| | CITY STATE Fountain Hills, AZ 85268 | ZIP | 03/31/2008 | \$390 | \$390 |
| | occupation Engineer | EMPLOYER Gasai | | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last summary Page Line 4(z), Column A] | page of Schedule A, transfer total to Detailed | | | |

SCHEDULE A

| Committee Name | 2. ID# 08-07 |
|---|---------------------|
| 3 Report covering period from February 21, 2008 | thru March 31, 2008 |

| | 3. Report covering period from February 21, 2008 | thru | March 31, 2008 | <u> </u> | | |
|-----|---|-------------|------------------|----------------------------|--------------------------------------|--|
| 4 | CONTRIBUTIONS | | DATE RECEIVED | AMOUNT RECEIVED THIS | CUMULATIVE TOTAL THIS CAMPAIGN | |
| | NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR | | | PERIOD | TO DATE | |
| 4a. | LAST FIRST MI Smith, Jackie K | | | | | |
| | STREET ADDRESS 374 W Citation Ln CITY STATE ZIP | | 03/31/2008 | \$390 | \$390 | |
| | Tempe, AZ 85284 | | | | | |
| | Global Account Manager EMPLOYER Dimension Data | | | | | |
| b. | LAST FIRST MI Coles, Scott M | | | | | |
| | STREET ADDRESS 4455 E Camelback Rd | | 03/31/2008 | \$390 | \$390 | |
| | Phoenix, AZ 85018 | | | | | |
| | President / CEO EMPLOYER Mortgages LTD | | | | | |
| C. | LAST FIRST MI Foreman, Kate | | | \$300 | \$300 | |
| | STREET ADDRESS 1070 E Sandpiper Dr | | 03/31/2008 | | | |
| | CITY STATE ZIP Tempe, AZ 85283 | | 03/31/2000 | | | |
| | OCCUPATION EMPLOYER Homemaker | | | | | |
| d. | LAST FIRST MI Coles, Ashley M | | | | | |
| | STREET ADDRESS 4455 E Camelback Rd | | 03/31/2008 | \$390 | \$390 | |
| | CITY STATE ZIP Phoenix, AZ 85018 | | 00/01/2000 | | | |
| | OCCUPATION EMPLOYER Homemaker | | | | | |
| e. | LAST FIRST MI Martini, Laura | | 03/31/2008 | \$390 | \$390 | |
| | STREET ADDRESS 6518 S 64th Ave | | | | | |
| | CITY STATE ZIP Laveen, AZ 85339 | | | | | |
| | OCCUPATION Senior VP EMPLOYER Mortgages LTD | | | | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total Summary Page Line 4(z), Column A] | to Detailed | | | | |

SCHEDULE A

2. ID#

| | Committee Name | | - | 08-07 | |
|----|---|-------------------------------|---------------------|--------------------|--------------------------|
| | 3. Report covering period from February 21, 200 | 08 | thru_March 31, 2008 | 3 | |
| 4 | CONTRIBUTI | ONS | DATE RECEIVED | AMOUNT RECEIVED | CUMULATIVE TOTAL THIS |
| | NAME, ADDRESS, OCCUPATION AND EMPLOYE | R OR CONTRIBUTOR | | THIS PERIOD | CAMPAIGN TO DATE |
| а. | LAST FIRST Calfee, Virginia T | MI | | | |
| | STREET ADDRESS 914 E Osborn Rd #303 | | 03/31/2008 | **** | \$390 |
| | Phoenix, AZ 85014 | ZIP | 03/31/2008 \$390 | | \$3 50 |
| | OCCUPATION Purchasing Manager | EMPLOYER Copper State Bolt | | | |
|). | LAST FIRST Haver, Christopher | MI | | | |
| | STREET ADDRESS 77 E Missouri #46 | | 03/31/2008 | \$390 \$390 | \$390 |
| | Phoenix, AZ 85012 | ZIP | 00/01/2000 | | ψ300 |
| | OCCUPATION RE Development | EMPLOYER Self | | | |
| 2. | LAST FIRST Ellet, David & Anne | MI | | | |
| | STREET ADDRESS 36611 N 51st Street | | 03/31/2008 | \$780 | \$780 |
| | CITY STATE Cave Creek, AZ 85331 | ZIP | 03/31/2008 | \$700 | φ/ου |
| | OCCUPATION Owner | EMPLOYER Scorpions Hockey | | | |

MI

MI

EMPLOYER Fiesta Bottling Co

ZIP

EMPLOYER Fiesta Bottling Co 03/31/2008

03/31/2008

\$200

\$250

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed

FIRST

FIRST

STATE

STATE

LeVangie, Amy L

STREET ADDRESS
4121 E Mitchell Dr

Phoenix, AZ 85018

OCCUPATION Office / Clerical

LAST Edgar, Clyde R

STREET ADDRESS 4908 E Calle del Medio

OCCUPATION Manager

Phoenix, AZ 85018

Summary Page Line 4(z), Column AJ

CITY

\$200

\$250

[&]quot;If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

SCHEDULE A

2. ID#

| | 1. Committee Name Elect Julie | Jakubek | | | 08-07 | |
|-----|---|-----------------|--|-------------------|--------------------------------------|---|
| | 3. Report covering period from Fel | bruary 21, 2008 | t | nru March 31, 200 | 8 | |
| 4 | NAME, ADDRESS, OCCUPATION | CONTRIBUTION | | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
| 4a. | LAST Quan, Nick | FIRST | MI | | | |
| | STREET ADDRESS 2516 W Gail Dr CITY Chandler, AZ 85224 | STATE | ZIP | 03/31/2008 | \$200 | \$200 |
| | OCCUPATION Public Relations | | EMPLOYER Denise Resnik & Accociates | | | |
| b. | LAST Edgar, Grace B STREET ADDRESS 4908 E Calle del Medio | FIRST | MI | | | |
| | CITY Phoenix, AZ 85018 OCCUPATION Homemaker | STATE | ZIP | 03/31/2008 | \$250 | \$250 |
| C. | LAST Kaps, Ryan STREET ADDRESS | FIRST | MI | | | |
| | 16957 E Monterey Dr CITY Fountain Hills, AZ 85268 | STATE | ZIP | 03/31/2008 | \$300 | \$300 |
| | OCCUPATION Designer | | EMPLOYER McAndrew Kaps Inc | | | |
| d. | LAST Koliopoulos, Peter | FIRST | МІ | | | |
| | STREET ADDRESS 4812 E Berneil Dr | STATE | ZIP | 03/31/2008 | \$390 | \$390 |
| | Paradise Valley, AZ 85253 OCCUPATION Architect | VIAIL | EMPLOYER | | | |
| _ | | FIRST | Circle West Architects | | | |
| e. | LAST | FIR51 | MI | | | 1 |

ZIP

EMPLOYER

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]

STATE

STREET ADDRESS

OCCUPATION

CITY

\$5,730

\$5,730

CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL*

SCHEDULE A-1

| Elect Julie Jakubek 1. Committee Name | 2. ID# 08-07 |
|--|---------------------|
| 3. Report covering period from February 21, 2008 | thru March 31, 2008 |
| | |

4. Aggregate Total of Contributions of \$25 or less

| DESCRIPTION | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO D |)ATE |
|---|-----------------------------------|---|------|
| Cash Donation | \$0 | \$20 | |
| | | | |
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| | | | |
| 5. TOTAL THIS PERIOD (Transfer total to Detailed Summary Page, Line 4(b), | \$0 | 6. CUMMULATIVE TOTAL THIS | \$20 |
| Column A] | | CAMPAIGN TO DATE (Transfer total to Detailed | |
| | | Summary Page, Line 4(b), Column B] | |

^{*}If contributions of \$25 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS FROM POLITICAL COMMITTEES

NAME, ADDRESS, CITY, STATE AND ZIP

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B [If last page of Schedule B, transfer total to

ID#

ID#

ID#

ID#

h.

5.

DATE RECEIVED

DATE RECEIVED

DATE RECEIVED

DATE RECEIVED

Detailed Summary Page, Line 4(c), Column A]

SCHEDULE **B**

2. ID#

08-07

| | 1. Committee Name Elect Julie Jakubek | | | 08-07 |
|----|---------------------------------------|---|--------------------|---|
| | 3. Report covering perio | ch 31, 2008 | | |
| 4 | | CONTRIBUTIONS | AMOUNT RECEIVED | CUMULATIVE TOTAL THIS |
| | IDE | NTITY OF CONTRIBUTOR AND DATE RECEIVED | THIS PERIOD | CAMPAIGN TO DATE |
| 4a | ID# | NAME, ADDRESS, CITY, STATE AND ZIP Southwest Ambulance Employee PAC PO Box 5919 | \$200 | \$200 |
| | DATE RECEIVED 02/21/2008 | Mesa, AZ 85211 | | |
| b. | ID# | NAME, ADDRESS, CITY, STATE AND ZIP Latino Christian Political Committee | | *************************************** |
| | DATE RECEIVED 03/04/2008 | 11535 N 81st Ave Peoria, AZ 82345 | \$390 | \$390 |
| C. | ID# | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DATE RECEIVED | | | |
| d. | ID# | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DATE RECEIVED | | | |
| e. | ID# | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DATE RECEIVED | | | |

\$590

\$590

| CANDIDATE LOANS | | | so | CHEDULE C |
|-----------------|--|------------------|--------------------|---|
| 1. | Committee Name Elect Julie Jakubek | | 2. ID# 08-07 | |
| 3. | Report covering period from February 21, 2008 thru Ma | rch 31, 2008 | | |
| 4. | LOANS MADE OR GUARANTEED BY CANDIDATE NAME AND ADDRESS FROM WHOM RECEIVED | DATE RECEIVED | AMOUNT RECEIVED | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
| 4a. | NAME, ADDRESS, CITY, STATE, AND ZIP Julie Jakubek | 03/28/2008 | \$6,950 | \$15,450 |
| | 1220 S Ash Ave Tempe, AZ 85281 | | | |
| | DESCRIPTION Personal loan to campaign | | | |
| b. | NAME, ADDRESS, CITY, STATE, AND ZIP | | | |
| | | | | |
| | DESCRIPTION | | | |
| C. | NAME, ADDRESS, CITY, STATE, AND ZIP | | | |
| | | | | |
| | DESCRIPTION | | | |
| d. | NAME, ADDRESS, CITY, STATE, AND ZIP | | | |
| | | | | |
| | DESCRIPTION | | | |
| е. | NAME, ADDRESS, CITY, STATE, AND ZIP | | | |
| | | | | |
| | DESCRIPTION | | | |
| f. | NAME, ADDRESS, CITY, STATE, AND ZIP | | | |
| | | | | |
| | DESCRIPTION | | | |
| 5. | ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAG [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), C | | \$6,950 | \$15,450 |

OTHER LOANS SCHEDULE C1 Elect Julie Jakubek 2. ID# 08-07 1. Committee Name Report covering period from February 21, 2008 _thru_March 31, 2008 3. ALL OTHER LOANS CUMULATIVE DATE AMOUNT TOTAL THIS NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF LOAN RECEIVED OF LOAN CAMPAIGN THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR TO DATE NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# 4a N/A N/A N/A N/A NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# DESCRIPTION NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# 4b NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# DESCRIPTION NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# DESCRIPTION NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total to Detailed Summary Page, Line 5(a), Column A]

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

| | | 2. ID# |
|---|--------------------------------|--------|
| Committee Name Elect Julie Jakubek | | |
| Report covering period from February 21, 2008 | _{thru} March 31, 2008 | |

| | 3. Report covering period from February 21, 2008 thru March 31, 2008 | | |
|-----|--|---------------------|------------------|
| 4 | EXPENDITURES | DATE EXPENDITURE | AMOUNT OF THE |
| | NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE | MADE | EXPENDITURE |
| 4a. | NAME, ADDRESS, CITY, STATE AND ZIP City of Tempe - City Clerk 31 E 5th Street Tempe, AZ 85281 | 02/29/2008 | \$10 |
| | DESCRIPTION OF ITEMS OR SERVICES PURCHASED Fee | | |
| b. | NAME, ADDRESS, CITY, STATE AND ZIP Adobe Basin Printing, LLC 3104 E Camelback Rd Phoenix, AZ 85016 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printing & sending mail pieces | 03/31/2008 | \$7,000 |
| C. | NAME, ADDRESS, CITY, STATE AND ZIP Adobe Basin Printing, LLC 3104 E Camelback Rd Phoenix, AZ 85016 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printing & sending mail pieces | 03/31/2008 | \$2,820 |
| d. | NAME, ADDRESS, CITY, STATE AND ZIP City of Tempe - City Clerk 31 E 5th Street Tempe, AZ 85281 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Voter Disk | 03/16/2008 | \$20 |
| e. | NAME, ADDRESS, CITY, STATE AND ZIP City of Tempe - City Clerk 31 E 5th Street Tempe, AZ 85281 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Voter Disk | 02/25/2008 | \$20 |
| f. | NAME, ADDRESS, CITY, STATE AND ZIP City of Tempe - City Clerk 31 E 5th Street Tempe, AZ 85281 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Voter Disk | 02/27/2008 | \$20 |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [if last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A] | · | \$9,890 |

^{*}Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

INDEPENDENT EXPENDITURES*

SCHEDULE **D-1**

| | 1. Committee Name Elect Julie Jakubek | 2. ID# 08-07 | |
|-----------|---|-----------------------------|---|
| | 3. Report covering period from February 21, 2008 thru March 31, 2008 | | |
| 4 | INDEPENDENT EXPENDITURES | DATE EXPENDITURE MADE | AMOUNT OF THE EXPENDITURE |
| | IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED | | _,,,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 4a. | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| i | N/A | | |
| l | | N/A | N/A |
| | PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • | | |
| | CANDIDATE OFFICE SOUGHT YEAR OF ELECTION | | |
| 4b. | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | | | |
| | | | |
| | PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • | | |
| | CANDIDATE OFFICE SOUGHT YEAR OF ELECTION | | |
| 4c. | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | | | |
| | | | |
| | | | |
| | PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • CANDIDATE OFFICE SOUGHT YEAR OF ELECTION | | |
| | | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line | 10, Column A] | |
| | | | |
| *SE | E A.R.S. § 16-901(14). | | |
| I certify | r, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, t or suggestion of any candidate, or any campaign committee or agent of that candidate. | consultation or co | ncert with or at the |
| | | | |
| V | ulikakuluk | | |
| Signatur | re of Treasurer | | |
| | NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS SIX MONTHS | WITHIN THE LAST | AMOUNT |
|] | | | |
| | | | |
| | | | |
| | | | |
| ے | | Schedule D |)-1 Page <u>1</u> of 1 |

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE **D-2**

2. ID#

| | 1. Committee Name Elect Julie Jakubek | 08-07 | |
|-----|---|-------------------|-----------------------|
| | 3. Report covering period from February 21, 2008 thru March 31, 2008 | | |
| 4 | LOANS MADE BY THE REPORTING COMMITTEE | DATE LOAN MADE | AMOUNT OF THE LOAN |
| | NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE | 20, 11, 11, 192 | 0220, |
| 4a. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| | N/A | N/A | N/A |
| b. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| | | | |
| C. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| | | | |
| d. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| | | | |
| е. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| | | | |
| f. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| | | | |
| g. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| | | | |
| h. | NAME, ADDRESS, CITY, STATE, ZIP. AND ID# | | |
| | | | |
| İ, | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| | | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [Transfer total to Detail Summary Page Line 12, Column A] | | |
| | | | |

Page 1 of 1

OFFSETS TO OPERATING EXPENSES *

SCHEDULE D-3

| | 1. Committee Name Elect Julie Jakubek | 2. ID# 08-07 | |
|-----|---|-----------------|------------------|
| | 3. Report covering period from February 21, 2008 thru March 31, 200 | 08 | |
| | REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES | DATE REFUND | AMOUNT OF THE |
| | NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED | RECEIVED | REFUND |
| ₽a. | NAME, ADDRESS, CITY, STATE, AND ZIP N/A | | |
| | | N/A | N/A |
| | DESCRIPTION OF REFUND | | |
| b. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | | | |
| | DESCRIPTION OF REFUND | | |
| C. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | | 1 | |
| | DESCRIPTION OF REFUND | | |
| d. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | | | |
| | DESCRIPTION OF REFUND | | |
| е. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | | | |
| | DESCRIPTION OF REFUND | | |
| f. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | | | |
| | DESCRIPTION OF REFUND | ļ | |
| 6 | ENTED TOTAL ONLY IELIAST DAGE OF SCHEDULE D. 2 life loop and and Schadula D. 2. temporar total to Datalina Described | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [If last page of Schedule D-3, transfer total to Detailed Summary Page Line 17 Column A] | | |
| * | Includes return of contributions made by reporting committee | | |
| | | Schedule ! | 0-3 Page 1 of 1 |

REPAYMENT OF CANDIDATE LOANS

Elect Julie Jakubek

SCHEDULE D-4

2. ID#

08-07

| | 1. Committee Name | | |
|------------|--|---------------------------|-------------------------------|
| | 3. Report covering period from February 21, 2008 thru March 31, 2008 | | |
| | REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE | DATE REPAYMENT MADE | AMOUNT OF THE REPAYMENT |
| | | | |
| la. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | Julie Jakubek 1220 S Ash Ave Tempe, AZ 85281 | 03/26/2008 | \$500 |
| b. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | | | |
| c. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | | | |
| d. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | | | |
| B. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| 5 . | NAME, ADDRESS, SITT, STATE, AND ZIF | | |
| f. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A] | | \$500 |
| | | Schedule [| 0-4 Page 1 of 1 |

REPAYMENT OF ALL OTHER LOANS

SCHEDULE D-5

| Elect Julie Jakubek 1. Committee Name | 2. ID# 08-07 | |
|--|---------------------------------|--|
| 3. Report covering period from February 21, 2008 | _{thru.} March 31, 2008 | |

| 4 | REPAYMENT OF ALL OTHER LOANS | DATE REPAYMENT | AMOUNT OF THE |
|-----|--|-------------------|------------------|
| | NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE | MADE | REPAYMENT |
| 4a. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | | N/A | N/A |
| | | | |
| b. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | | | |
| | | | |
| C. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | | | |
| | | | |
| đ. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | | | |
| | | | |
| e | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | | | |
| | | | |
| f. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
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| | | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A] | | |
| | | | |

Page 1__of 1__

TRANSFERS TO OTHER POLITICAL COMMITTEES

1. Committee Name Elect Julie Jakubek

SCHEDULE **D-6**

2. ID#

08-07

| | 3. Report covering period from February 21, 2008 thru March 31, 2008 | | |
|-----|---|-----------------------|---------------------------|
| 4 | TRANSFERS MADE BY THE REPORTING COMMITTEE | DATE TRANSFER MADE | AMOUNT OF THE TRANSFER |
| | NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE | | |
| 4a. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | N/A | | |
| | | N/A | N/A |
| | | | |
| b. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | | | |
| | | | |
| | | | |
| C. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
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| d. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
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| e. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
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| f. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
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| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A] | | |
| | | | |

ANY OTHER DISBURSEMENT

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page Line 15 Column A]

1. Committee Name Elect Julie Jakubek

SCHEDULE D-7

2. ID# 08-07

| | 3. Report covering period from February 21, 2008 thru March 31, | 2008 | |
|----|--|------------------------------|----------------------------------|
| | | | |
| | ANY OTHER DISBURSEMENTS | DATE DISBURSEMENT MADE | AMOUNT OF THE DISBURSEMENT |
| | NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION | | |
| a, | NAME, ADDRESS, CITY, STATE, ZIP AND ID# N/A | | |
| | IVA | | |
| | | N/A | N/A |
| | DESCRIPTION | | |
| b. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | | | |
| | | | |
| | DESCRIPTION | | |
| C. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | | | |
| | | | |
| | DESCRIPTION | | |
| d. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | | | |
| | | | |
| | DESCRIPTION | | |
| e. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | | | |
| | | | |
| | DESCRIPTION | | |
| | | L | |

Page 1 of 1

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

| 1. Committee Name Elect Julie Jakubek | 2. ID# |
|---------------------------------------|--------|
| F-104 0000 | |

3. Report covering period from February 21, 2008 thru_March 31, 2008 4 **IN-KIND CONTRIBUTIONS and EXPENDITURES** DATE FAIR MARKET VALUE NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN NAME, ADDRESS, CITY, STATE, ZIP AND ID# Bette Denlinger CONTRIBUTION . 1762 S Emerson EXPENDITURE • • Mesa, AZ 85210 03/11/2008 \$50 DESCRIPTION Food and preparation for campaign event OCCUPATION **EMPLOYER** Retired NAME, ADDRESS, CITY, STATE, ZIP AND ID# Julie Jakubek CONTRIBUTION . 1220 S Ash Ave EXPENDITURE • • Tempe, AZ 85281 03/18/2008 \$50 DESCRIPTION paper/ink/pens/stamps/office supplies EMPLOYER Insurance Agency Owner Jakubek, Inc NAME, ADDRESS, CITY, STATE, ZIP AND ID# CONTRIBUTION . EXPENDITURE • • DESCRIPTION OCCUPATION EMPLOYER NAME, ADDRESS, CITY, STATE, ZIP AND ID# CONTRIBUTION . EXPENDITURE • • DESCRIPTION OCCUPATION **EMPLOYER** ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E. [If last page of Schedule E, transfer total to Detailed Summary Page \$100 Line 6, Column AJ ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A] \$100

Page 1 of 1

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

2. ID# 08-07

| 3. Report covering period from February 21, 2008 thru March 31, 2008 | | 1. Committee Name Elect Julie Jakubek | 2. 15 # 08-07 | |
|--|-----|--|---------------|---------|
| NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL ABOUNT RECEIPED NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT C. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT C. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT C. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT C. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT C. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT C. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 2. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 3. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 4. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 (If last page of Schedule F-1, transfer total to Detailed Summary Page | | 3. Report covering period from February 21, 2008 thru March 31, 20 | 008 | |
| NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT C NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT d NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT e. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 2. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 If liast page of Schedule F-1, transfer total to Detailed Summary Page | 4 | DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS | AMOUNT | |
| DESCRIPTION OF RECEIPT D. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT DESCRIPTION OF RECEIPT DESCRIPTION OF RECEIPT DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 (If last page of Schedule F-1, transfer total to Detailed Summary Page | | | KECEIVED | RECEIPT |
| DESCRIPTION OF RECEIPT C NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT C NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT C NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT C NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT I. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT I. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT S ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Defailed Simmany Page | 4a. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| DESCRIPTION OF RECEIPT I. NAME. ADDRESS, CITY, STATE, ZIP AND IDM DESCRIPTION OF RECEIPT J. NAME. ADDRESS, CITY, STATE, ZIP AND IDM DESCRIPTION OF RECEIPT DESCRIPTION OF RECEIPT J. NAME. ADDRESS, CITY, STATE, ZIP AND IDM DESCRIPTION OF RECEIPT DESCRIPTION OF RECEIPT | | | N/A | N/A |
| DESCRIPTION OF RECEIPT DESCRIPTION OF RECEIPT DESCRIPTION OF RECEIPT DESCRIPTION OF RECEIPT NAME: ADDRESS: CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT NAME: ADDRESS: CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT I. NAME: ADDRESS: CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT J. NAME: ADDRESS: CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT S ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page | | DESCRIPTION OF RECEIPT | | |
| C NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT DESCRIPTION OF RECEIPT e. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT I. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page | b. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| C NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT DESCRIPTION OF RECEIPT e. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT I. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page | | | | |
| DESCRIPTION OF RECEIPT DESCRIPTION OF RECEIPT B. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT I. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT J. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 (If last page of Schedule F-1, transfer total to Detailed Summary Page | | DESCRIPTION OF RECEIPT | | |
| d NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT e. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT f. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 5 ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 last page of Schedule F-1, transfer total to Detailed Summary Page | C. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| d NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT e. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT f. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 5 ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 last page of Schedule F-1, transfer total to Detailed Summary Page | | | | |
| DESCRIPTION OF RECEIPT e. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT f. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page | | DESCRIPTION OF RECEIPT | | |
| e. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page | d. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| e. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page | | | | |
| DESCRIPTION OF RECEIPT 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT 5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page | | DESCRIPTION OF RECEIPT | 7 | |
| NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page | e. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page | | | | |
| DESCRIPTION OF RECEIPT 5 ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page | | DESCRIPTION OF RECEIPT | - | |
| DESCRIPTION OF RECEIPT 5 ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page | f. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| 5 ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page | | | | |
| | | DESCRIPTION OF RECEIPT | | |
| | | | 1 | |
| | 5 | | | |

OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE F-2

| | 1. Committee Name Elect Julie Jakubek | 08-07 | |
|----|--|----------------|------------------|
| | 3. Report covering period from February 21, 2008 thru March 31,2008 | | |
| 4 | REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED | DATE REFUND | AMOUNT OF THE |
| | NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE | MADE | REFUND |
| a. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# N/A | | |
| | | | |
| | | N/A | N/A |
| | DESCRIPTION OF REFUND | | |
| b. | NAME, ADDRESS. CITY, STATE, ZIP AND ID# | | |
| | | , | |
| | | | |
| | DESCRIPTION OF REFUND | | |
| C. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
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| | | | |
| | DESCRIPTION OF REFUND | | |
| d. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
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| | DESCRIPTION OF REFUND | | |
| e. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
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| | DESCRIPTION OF REGIND | | |
| | DESCRIPTION OF REFUND | | |
| f. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
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| l | | | |

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(E), Column A]

DESCRIPTION OF REFUND

Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

| | Committee Name Elect Julie Jakubek | : | 2. 1D# | | | |
|---|--|---------------------|--------|--|-------------|--|
| | 3. Report covering period from February 21, 2008 | thru March 31, 2008 | | | | |
| 4 | DEBTS AND OBLIGATIONS | OUTSTANDING | | | OUTSTANDING | |

| | keport covering period from thru Maich 31, 2000 | | | | |
|----|--|--|--------------------------------|------------------------|---|
| 4 | DEBTS AND OBLIGATIONS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL | OUTSTANDING BALANCE BEGINNING THIS PERIOD | AMOUNT INCURRED THIS PERIOD | PAYMENT THIS PERIOD | OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
| | COMMITTEE) TO WHOM DEBT IS OWED | THIS PERIOD | | | |
| a. | NAME, ADDRESS, CITY, STATE. ZIP AND ID# N/A | N/A | N/A | N/A | N/A |
| | DESCRIPTION OF DEBT | | | | |
| b. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | | |
| | DESCRIPTION OF DEBT | | | | |
| C. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | | |
| | DESCRIPTION OF DEBT | | | | |
| d. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | | |
| | DESCRIPTION OF DEBT | | | | |
| е. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | | |
| | DESCRIPTION OF DEBT | | | | |
| 5. | ENTER TOTAL OUTSTANDING BALANCE AT CLO F-3 [Transfer total to Detail Summary Page Line 19, Colo | | | | |